

# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.

For Official Use Only

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READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <b>13002</b>	2. Fiscal Year Covered From: <b>JAN / 1 / 2004</b> Through: <b>DEC / 31 / 2004</b>
3. Name and address of person filing. Name <b>DANIEL S. WHEELER</b>  P.O. Box, Bldg., Room No., if any <b>16324 ARGENTA TERRACE</b> Street <b>CHIND HILLS</b> City  State <b>CA</b> ZIP Code + 4 <b>91709-4925</b>	4. Name, file number, and address of labor organization. Name <b>UNITED ASSOCIATION OF JOURNEYMEN AND APPRENTICES OF THE PLUMBING AND PIPE FITTING INDUSTRY OF THE UNITED STATES AND CANADA</b> Labor Organization File Number <b>000-111</b>  P.O. Box, Building and Room Number, if any <b>901 MASSACHUSETTS AVE, N.W.</b> Street <b>WASHINGTON, D.C.</b> City  State <b>D.C.</b> ZIP Code + 4 <b>20001-4397</b>
5. Position in labor organization. <b>SPECIAL REPRESENTATIVE</b>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).  Name  Trade Name, if any:  P.O. Box, Bldg., Room No., if any  Street  City  State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income.    7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct and complete. (See the section on penalties in the instructions.)

Signed

On

**AUG. 12, 2005**

Date

**909/393-7500**

Telephone Number

Name of Person Filing <b>DANIEL S. WHEELER</b>		File Number U-
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**B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.**

<p>8 Name and address of Business (including trade name, if any)</p> <p>Name <b>PIPING INDUSTRY PROGRESS AND EDUCATION TRUST AND TRUST FUND</b></p> <p>Trade Name, if any:</p> <p>P O Box, Bldg, Room No., if any <b>SUITE 200</b></p> <p>Street <b>501 SHATTU PLANE</b></p> <p>City <b>LOS ANGELES</b></p> <p>State <b>CA</b> ZIP Code + 4 <b>90020</b></p>	<p>9 Business deals with</p> <p><input checked="" type="checkbox"/> a Labor Organization</p> <p>b Trust</p> <p>c Employer</p>
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<p>10 If 9 b. or 9 c. is checked give trust or employer's name</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P O Box, Bldg, Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11 a. Nature of such dealing.</p> <p><b>P.I.P.E. IS A LABOR-MANAGEMENT COOPERATIVE TRUST FUND</b></p>
<p>11.b. Approximate dollar value of such dealing.</p>	<p>12.a. Nature of interest held or income received.</p> <p><b>RECEIVED SUNGLASSES AS A CHRISTMAS GIFT.</b></p>
<p>12.b. Amount.</p>	<p><b>\$179</b></p>

**C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.**

<p>13.a Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name</p> <p>Trade Name, if any:</p> <p>P O Box, Bldg, Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14 a. Nature of payment.</p>
<p>13 b Is the Business an Employer or Consultant ?</p>	<p>14 b. Amount of payment</p>

Name of Person Filing <b>DANIEL S. VINEELER</b>	File Number U-
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B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

<p>8 Name and address of Business (including trade name, if any)</p> <p>Name <b>NATIONAL INSPECTION TESTING AND CERTIFICATION CORPORATION</b></p> <p>Trade Name, if any</p> <p>P O Box, Bldg. Room No., if any <b>SUITE 201</b></p> <p>Street <b>501 SHATTO PLACE</b></p> <p>City <b>LOS ANGELES</b></p> <p>State <b>CA</b> ZIP Code + 4 <b>90020</b></p>	<p>9 Business deals with</p> <p><input checked="" type="checkbox"/> a Labor Organization</p> <p>b Trust</p> <p>c Employer</p>
<p>10 If 9 b. or 9 c. is checked give trust or employer's name</p> <p>Name</p> <p>Trade Name, if any</p> <p>P O Box, Bldg., Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>11.a Nature of such dealing.</p> <p><b>N.I.T.C. TEST AND CERTIFY OUR MEMBERS JOB SKILLS.</b></p>
	<p>11.b Approximate dollar value of such dealing.</p>
	<p>12.a Nature of interest held or income received.</p> <p><b>RECEIVED REIMBURSEMENT FOR LODGING WHILE ATTENDING M. MADDALENI RETIREMENT CELEBRATION.</b></p>
	<p>12.b Amount <b>\$1264</b></p>

<p>C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.</p>	
<p>13.a Name and address of Employer or Labor Relations Consultant (including trade name, if any)</p> <p>Name</p> <p>Trade Name, if any</p> <p>P O Box, Bldg. Room No., if any</p> <p>Street</p> <p>City</p> <p>State ZIP Code + 4</p>	<p>14.a Nature of payment.</p>
<p>13.b Is the Business an Employer or Consultant ?</p>	<p>14.b Amount of payment</p>

Name of Person Filing <b>DANIEL S. WHEELER</b>	File Number U-
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B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

8 Name and address of Business (including trade name, if any). Name <b>NATIONAL INSPECTING TESTING AND CERTIFICATION CORPORATION</b> Trade Name, if any: P O Box, Bldg, Room No., if any <b>SUITE 201</b> Street <b>501 SHATT PLACE</b> City <b>LOS ANGELES</b> State <b>CA</b> ZIP Code + 4 <b>90020</b>	9 Business deals with <input checked="" type="checkbox"/> a Labor Organization b Trust c Employer
10 If 9 b. or 9 c. is checked give trust or employer's name Name Trade Name, if any: P O Box, Bldg, Room No., if any Street City State ZIP Code + 4	11 a. Nature of such dealing. <b>N.I.T.C. TEST AND CERTIFY OUR MEMBERS JOB SKILLS.</b>
11 b. Approximate dollar value of such dealing.	12 a. Nature of interest held or income received. <b>RECEIVED SUNGLASSES/ACCESSORIES AS CHRISTMAS GIFT;</b>
12 b. Amount	<b>\$45.00</b>

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.	
13 a Name and address of Employer or Labor Relations Consultant (including trade name, if any) Name Trade Name, if any P O Box, Bldg, Room No., if any Street City State ZIP Code + 4	14 a. Nature of payment.
13 b Is the Business an Employer or Consultant ?	14 b Amount of payment

Name of Person Filing

DANIEL S. WHEELER

File Number U-

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name, if any)

Name NATIONAL INSPECTION TESTING  
AND CERTIFICATION CORPORATION

Trade Name, if any

P O Box, Bldg, Room No., if any SUITE 201

Street 501 SHATTU PLACE

City LOS ANGELES

State CA ZIP Code + 4 90020

9 Business deals with

☒ a Labor Organization

b Trust

c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name, if any

P O Box, Bldg Room No., if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

N.I.T.C. TEST AND CERTIFY OUR  
MEMBERS JOB SKILLS.

11.b. Approximate dollar value of such dealing

12 a. Nature of interest held or income received

RECEIVED 2 N.I.T.C. SHIRTS AS  
GIFT.

12 b. Amount

\$45.00

C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

13 a Name and address of Employer or Labor Relations Consultant  
(including trade name, if any)

Name

Trade Name, if any

P O Box, Bldg Room No., if any

Street

City

State ZIP Code + 4

14 a Nature of payment

13 b Is the Business an Employer

or Consultant

?

14 b Amount of payment